

Application for Listing as Leadership Resource for Virginia Women

Name of organization:

Address:

City:

State:

ZIP:

Contact Name:

Contact Title:

Contact Number:

Contact E-mail:

Web address:

Brief description of the resources or services available that support women in leadership roles:

Return completed form to: council.women@dss.virginia.gov

Submission of this form grants permission for the Department of Social Services to list our web-site on the [Council on the Status of Women](#) site as part of its [Leadership Resources for Virginia Women](#).